

1711



FREE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) = **(\$)** 266.00

PTO/SB/17 (10/02) (modified)
Approved for use through 04/30/2003, OMB 0651-0032
Patent and Trademark Office; US DEPARTMENT OF COMMERCE

Complete if Known

Application Number	10/074,339
Filing Date	February 12, 2002
Inventor	Charles E. Taylor et al.
Group Art Unit	1711
Examiner Name	Thao T. Tran
Attorney Docket Number	SHPR-01041USP

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to:

- ☐ Charge the indicated fees to the below mentioned deposit account.
- ☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.¹
- ☐ Applicant claims small entity status. See 37 CFR 1.27.

Deposit Account Number: 06-1325
Deposit Account Name: Fliesler Dubb Meyer & Lovejoy

2. ☒ **Payment Enclosed:**
☒ Check ☐ Other

FEE CALCULATION (fees effective 10/1/01)

1. FILING FEE

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee</u>	<u>Fee</u>
<u>Fee Code/Fee</u>	<u>Fee Code/Fee</u>	<u>Description</u>	<u>Due</u>
1001/\$770	2001/\$385	Utility Filing	<input type="text"/>
1002/\$330	2002/\$165	Design Filing	<input type="text"/>
1004/\$750	2004/\$375	Reissue	<input type="text"/>
1005/\$160	2005/\$80	Provisional Filing	<input type="text"/>
SUBTOTAL (1)		(\$)	0

2. CLAIMS

<u>Large Entity</u> Fee Code/Fee	<u>Small Entity</u> Fee Code/Fee	Fee Description
1202/\$18	2202/\$9	Claims in excess of 20
1201/\$86	2201/\$43	Independent claims in excess of 3
1203/\$280	2203/\$140	Multiple dependent claim
1204/\$86	2204/\$43	Reissue independent claims over original patent
1205/\$18	2205/\$9	Reissue claims in excess of 20 and over original patent

3. ADDITIONAL FEES

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
1051/\$130	2051/\$65	Surcharge - late filing fee or oath	<input type="text"/>
1052/\$50	2052/\$25	Surcharge-late provisional filing fee or cover sheet	<input type="text"/>
1812/\$2,520	1812/\$2,520	For filing a request for reexamination	<input type="text"/>
1251/\$110	2251/\$55	Extension for response within first month [†]	<input type="text"/>
1252/\$420	2252/\$210	Extension for response within second month [†]	<input type="text"/>
1253/\$950	2253/\$475	Extension for response within third month [†]	<input type="text"/>
1254/\$1,480	2254/\$740	Extension for response within fourth month [†]	<input type="text"/>
1255/\$1,970	2255/\$985	Extension for response within fifth month [†]	<input type="text"/>
1401/\$320	2401/\$160	Notice of Appeal	<input type="text"/>
1453/\$1,300	2453/\$650	Petition to revive unintentionally abandoned application	<input type="text"/>
1501/\$1,330	2501/\$665	Utility Issue Fee (Or Reissue)	<input type="text"/>
1502/\$470	2502/\$235	Design Issue Fee	<input type="text"/>
1460/\$130	1460/\$130	Petitions to the Commissioner	<input type="text"/>
1814/\$110	2814/\$55	Statutory Disclaimer	<input type="text"/>
1806/\$180	1806/\$180	Submission of Information Disclosure Statement	180
8021/\$40	8021/\$40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
1809/\$750	2809/\$375	Filing a submission after final rejection (37 CFR 1.129(a))	<input type="text"/>
1801/\$770	2801/\$385	Request for Continued Examination (RCE)	<input type="text"/>

Other fee (specify):

Other fee (specify):


SUBTOTAL (3) (\$) 180

(Col. 1)		(Col. 2)		(Col. 3)				
For	No. of Existing Claims		Highest No. Previously Paid For		Extra**		Fee	Fee Due
TOTAL	37	minus*	20 or 39	=	0	x		0
INDEP	14	minus*	3 or 13	=	1	x	86	86
[] First presentation of multiple dependent claim								0

* Subtract the greater number of Col. 2

**** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3**

SUBTOTAL (2) **(\$)** 86

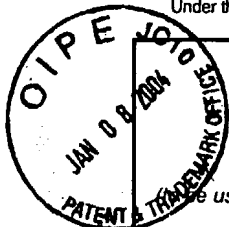
SUBMITTED BY		Complete (If applicable)	
Typed or Printed Name	Jeffrey R. Kurin	Reg. Number	41,132
Signature		Date	1/6/04

Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

Use for all correspondence after initial filing)

TRANSMITTAL FORM Use for all correspondence after initial filing)		Application Number	10/074,339
		Filing Date	February 12, 2002
		Inventor	Charles E. Taylor et al.
		Group Art Unit	1711
		Examiner Name	Thao T. Tran
Total Number of Pages in This Submission (Excluding References & ISR)	27	Attorney Docket Number	SHPR-01041USP

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Certificate of Mailing	<input type="checkbox"/> Formal Drawings	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Fee Transmittal with Deposit Account Authorization	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Check for \$266.00	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Itemized Postcard
<input checked="" type="checkbox"/> Third Information Disclosure Statement, PTO-1449, 69 References	<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Request for RCE	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Declaration	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Application Data Sheet	Remarks:	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Fliesler Dubb Meyer & Lovejoy LLP Jeffrey R. Kurin, Reg. No. 41,132		
Signature			
Date	1/6/04		

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on the date below.			
Typed or printed name	Jeffrey R. Kurin		
Signature		Date	1/6/04

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